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State Society

County secretaries are reminded of the resolution passed by the House of Delegates at the annual meeting in May, 1921, that "the annual State society dues shall be fixed at \$8 per annum for the year 1922, an increase of \$1."

Prompt payment, and report of payment, in-sures full protection and all the rights and privileges at all times for all members in continuous good standing. Secretaries should be particular that all members understand that defense is

afforded only to members whose dues are kept fully paid, in accordance with the following:

Medical Defense Rules, Section 3: "Dues must be paid to the secretary of the County Medical Society to which seems member belongs prior to be paid to the secretary of the County Medical Society to which each member belongs, prior to the end of February of each year. Any member whose dues are not paid prior to March 1, and whose name is not reported as having paid his dues by the secretary of his County Medical Society is dropped from the list of members in good standing as of January 1 of such year, and such member is deprived of Medical Defense afforded by the State Society for the period from January 1 of such year to the date when his assessment is received by the State Society."

January 1 of such year to the date when his assessment is received by the State Society."

It would seem that, if there was a more general understanding of this rule, there would be fewer members allowing their dues to lapse until late in the year. We hope to have all members promptly paid and reported, and thus included in our roll of members in good standing for the full year of 1922 year of 1922.

County Societies

Alameda County (as reported by Dr. Pauline Nusbaumer, secretary)—The monthly meeting of the Alameda County Medical Association was held at the Alameda County Public Health Center, Thursday evening, October 17, 1921, and the following program, arranged by Dr. Reinle, was given:

"The Handling of Hypertension Cases" was Dr. Eugene S. Kilgore's subject. Under prophylaxis, he brought out that "heredity is more important than commonly realized, and young persons with a family history of circulatory degeneration should be considered potential cases of hypertension. Experience in re-examining college students after ten years, suggests that the same is often true of young people with blood pressure at about the upper normal limits. Moderation in eating, drinking, exercise, and excitement, should be prescribed, but with care to secure good nourishment, good physical training, and to avoid anxiety neuroses. This is the time

and to avoid anxiety neuroses. to eradicate focal infections.

In speaking of treatment he emphasized the fact that "in fully developed cases of hypertension it is important to separate those with good cardiac compensation from those with beginning decompensation. The former may take comparatively liberal exercise, which, however, is graduated to avoid sudden strain; the latter need complete rest, and frequently digitalis, to be followed by great care in grading exercise. Bleeding is often of value here, but more so in acute decompensation. Pressure-lowering drugs offer no permanent advantage; and in general, no pressure-lowering measures, except correction of faulty habits, are desirable."

Dr. Thos. Addis, in his paper on the "Relation Between Hypertension and Bright's Disease," said

that "in the diagnosis of hypertension the condition under which the pressure observations are made is all important. In a large series of observations on normal individuals, the average systolic pressure was 99 in the early morning before they had risen from bed, while during the day the average systolic pressure was 127. The variability of pressure measurements is less in the early morning, under conditions similar to those observed for measurements of basal metabolism. While only 1 in 1000 normal individuals have a systolic pressure as high or higher than 133 under basal conditions, there is 1 out of every 23 normals who has a pressure as high or higher than 160 under daytime conditions. "In the diagnosis of Bright's disease two things

are essential, a method by which the nature of the lesion and a method by which the extent of the

ession and a method by which the extent of the lesion can be determined.

"The blood pressure level and the nature and extent of the renal lesion, in a series of cases covering all varieties of Bright's disease, was compared. The conclusion was drawn that a direct relation between hypertension and Bright's disease was present only in acute renal decompensation. In other cases the relationship is of the nature of an association and not of causal relation."

Dr. Stewart Irwin opened the discussion of Dr. Kilgore's paper. In the general discussions which followed, among those who participated were Drs. C. H. Miller, M. L. Emerson, Alexander, MacLean, W. O. Smith, Crosby, Sweet, O'Connor. Nutting. W. O. Smith, Crosby, Sweet, O'Connor, Nutting, Gilbert, McVey and R. T. Sutherland.

There was a special meeting of the association on the 20th, when Dr. Isaac Jones, author of "Equilibrium and Vertigo," was the speaker. He demonstrated some of his work by means of moving pictures. Professor Maxwell, Associate Professor of Physiology at the University of California, also spoke.

The annual banquet of the association was held at the Hotel Oakland, October 27.

Kern County (as reported by Dr. Edward R. Guinan)—The regular monthly meeting of the society was held on the evening of October 21 at the Kern General Hospital, Bakersfield, with eight members and one guest present and thirtyone members absent.

Dr. McNamara was the speaker of the evening, reading a paper on Dysuria in Women. Doctors Buchner and Compton led in the discussion. The business meeting was followed by a social meeting under the supervision of Dr. Joe Smith.

Los Angeles County (as reported by Dr. Harlan Shoemaker, Secretary)—The first regular meeting of the new fiscal year of the Society was held in conjunction with the Harbor Branch in the Hotel Virginia at Long Beach and was exceedingly well attended.

The scientific program in the afternoon con-

Some unusual manifestations of syphilis with microscopic sections. Willard Stone, M. D.

Some practical considerations regarding glaucoma. J. H. Kellar, M. D. Remarks on the pathogenesis and treatment of essential epilepsy. Illustrated with lantern slides. I. Leon Meyers, M.D.

This paper elicited an interesting discussion by Dr. Cecil Reynolds, who disagreed on the treatment of this condition with Dr. Meyers, maintaining that many of these cases were surgical and citing operative cases from his own practice in which good results and marked benefit has been obtained.

Post-operative indication for the use of physio-therapy. F. H. Mikels, M. D. After dinner an open meeting was held at which Celestine J. Sullivan, executive secretary of the League for Conservation of Public Health, delivered an impressive review of the splendid work of the League during the past year and a full statement of its important problems confronting us. Following Mr. Sullivan, Dr. W. E. Musgrave, secretary of the Medical Society of the State of California and chairman of the Committee on Medical Economics Education and Hospitals of the League, delivered a timely address on hospital betterment, in which particular stress was laid on the number of stock-selling hospital schemes which were being presented to physicians at this time, and the probable ultimate failure of most of them to be of benefit to the sick of the community or to the attending physician. This warning came at a particular proportion of the probability of the sick of the community or to the attending physician. ticular appropriate time, as the need for additional hospital facilities in Los Angeles County is so great that, like the proverbial drowning man, we are all tempted to grasp at straws. It is said that the U. S. Government has made overtures toward purchase of one or more hospitals in Los Angeles with a view to using them for rehabilitation purposes. It is earnestly hoped that none of these deals will be consummated, as the hospital needs of the civil population of Los Angeles are becoming greater with every passing month.

On October 20 the regular Scientific meeting of the Society was held in the auditorium of the new Pacific Mutual Building, Sixth and Grand avenue.

Program:

Ultra-violet light in the treatment of varicose

ulcers. Samuel Ayres, Jr., M. D. Case of Richter's partial enterocele. J. Lee Hagadorn, M. D.

Results in interposition operations for procidentia and prolapse based on a series of 118 cases in the gynecological clinic of Johns Hopkins Hospital. Illustrated with lantern slides. H. N. Shaw, M. D.

The action of radiation on tonsillar and hyper-trophied lymphoid tissues. Albert Soiland, M. D. The use of radium in cancer. Illustrated with lantern slides. Rex Duncan, M. D.
The following resolution of the Board of Coun-

cillors of the Los Angeles County Medical Society was ordered printed in the last Bulletin:

Whereas, It is evident that there is a widespread popular belief that the members of the medical profession are profiting by the present Prohibition Enforcement Law, and are lending themselves to a loose and unprofessional policy of prescribing, either for mercenary reasons or to accommodate their friends; and

Whereas, While we believe that by far the greater majority of our profession are honorable, ethical and actuated by purely professional motives, in this as in other matters, yet we know that there is a small minority who are not always so actuated;

therefore be it
Resolved, That we, as representatives of the medresolved, that we, as representatives of the medical profession of the city and county of Los Angeles, go on record as absolutely opposed to the prescribing of alcoholic liquors for other than strictly therapeutic purposes, and that we are opposed to any doctor's prescribing said liquors except after a thorough personal physical examination. of the patient, said examination to be made at each and every time that such a prescription is written and by the doctor himself. Any member of this Society who may violate this rule shall render himself liable to trial and expulsion from the Society for unethical conduct; and be it further

Resolved, That it is our definite belief, founded on observation and experience, that very rarely, if ever, are alcoholic remedies necessary in the practice of medicine, and that nearly always, if not quite always, other remedies can be made in quite always, other remedies can be used with equal efficacy; and be it further

Resolved, That the Los Angeles County Medical

Association does not go on record as being either

opposed to or in favor of prohibition.
Signed: CHARLES C. BROWNING,
EDWARD M. PALLETTE,

Committee.

This resolution marks a decided awakening of a civic conscience which has met with the general approval of the lay public.

Obituary—Dr. A. J. Scott
Organized medicine and the State of California suffered an irreparable loss in the death of Dr. A. J. Scott, of 905 South Ardmore avenue, Los Angeles, October 22, 1921, at Sacramento, California. Dr. Scott was born in Missouri sixty-three years ago, and had been a resident of Los Angeles for nineteen years. He was in active practice, with

nineteen years. He was in active practice, with offices in the Auditorium Building for many years, and of late had devoted much of his time to civic affairs, in which his activities were uniformly for the public good.

As a member of the Chamber of Commerce he took an active interest in the problems of harbor development, and as a member of the Chamber's Reception Committee his death will seem a personal loss to many notable visitors to Los Angeles

in years past.

He was appointed a member of the State Board of Medical Examiners two years ago by Governor Stephens, and while on a trip to Sacramento, engaged in this duty, he expired from an acute attack

of angina pectoris.

The Society desires to convey to his sorrowing widow and children, sincere sympathy and pro-found regret at the death of this good friend of

The funeral services, conducted at the residence by Dr. Cortland Meyers of Mount Temple, Boston, Mass., an old friend of Dr. Scott's, were largely attended by the profession.

MICHAEL CREAMER.

Merced County (as reported by Dr. Brett Davis, secretary)—The regular meeting of the Merced County Society was held at the office of the secretary on November 3 with seven members present and twelve absent. Dr. Louis Clive Jacobs of San Francisco gave an interesting talk illustrated with lantern slides on Affections of the Posterior Urethra and Bladder. Mr. Hartley F. Peart, general counsel for the State Society, gave a talk on the Indemnity Defense Fund, and Mr. Celestine J. Sullivan, executive secretary of the League for the Conservation of Public Health, gave an outline of the activities of the league.

Orange County (as reported by Dr. C. R. Lane)—The regular meeting of the Orange County Hospital on Tuesday evening, November 1, Dr. Walter V. Brem of Los Angeles addressed the society in regard to the work being done by the League for the Conservation of Public Health, and suggested that a physician be appointed in each end of the county to act in conjunction with the Los Angeles branch of the League. Dr. Johnston of Anaheim was appointed to represent the north end of the county, and Dr. Wehrly the south. Dr. Alfred E. Gallant of Los Angeles presented a very interesting paper on Potts Fracture. End Results of some cases of Infantile Paralysis and Tuberculosis of the Spine. Some of the doctor's patients were sent to the Orange County Hospital, and presented as a very instructive clinic.

Riverside County (as reported by Dr. Thomas A. Card, secretary)—The regular meeting of the Riverside County Medical Society was held October 10, 1921, at 8 p. m., Chamber of Commerce rooms. Vice-President Paul E. Simonds in the

Hospital Standardization. Dr. Edw. T. Dil-

lon, Los Angeles, Cal.
2. Organizing the Profession and the Hospital for a County-wide Health Program. Dr. C. Van

Zwalenburg, Riverside, Cal.
Dr. Dillon illustrated his talk by exhibiting sample hospital records on the screen, explaining in detail the keeping of the record. He spoke of the follow-up system whereby the patient reported his condition following operation or treatment. At the monthly staff meetings all deaths occurring in the hospital were investigated as to the cause of death. The system of Hospital Standardization required more careful diagnostic work, resulting in a greater number of accurate pre-operative diagnoses and a lowered post-operative mortality rate.

Dr. C. Van Zwalenburg called attention to the

wave for better health which is sweeping the country, in an effort to preserve the life and health of

the individual.

In general, the movement is under the leadership of social workers and lay people, with no conception of the medical problem involved. medical profession must prepare to direct this community work in its large program of preventive medicine.

He suggested the organization of the County Medical Society make the hospital the clearing-house for diagnosis. The doctors in the outlying towns to bring their patients to the hospital for laboratory studies and consultation, as needed. The diagnosis made, the patient is still the patient of the doctor who brought him to the hospital, and is his for treatment by himself or subject to assignment assignment.

He showed the importance of clinics in connection with the hospital, extending into the communities as weekly, bi-weekly or monthly clinics in the various branches of medicine. He stressed the

educational side of the health clinic.

Each community should organize its welfare organization, which would take care of its own needy, its free patients and part-pay patients. centers to expand, taking on other phases of welfare work as the foreign, education and relief work

of the City Home League.

The important thing to do is to make a study of the health and welfare work and keep our hands upon it. Much unsatisfactory work is being done by all kinds of poorly guided organizations all over the county. This work is new, but it has come to stay, and the logical guiding hand is the medical profession medical profession.

A chart was displayed which showed in a graphic way the relation between the community hospital, social agencies, health, education and the medical

profession.

The secretary reported the withdrawal of members from the society as follows: Dr. W. D. Rolph, who has moved to Richmond, California; Captain Eugene G. Reinartz, Municipal Field, Eugene, Oregon; Dr. John Paul Frey, Los Angeles; Dr. A. J. Hill, Salem, Oregon.

San Diego County—The regular meeting of the San Diego County Society was held at the Society rooms on November 8. Dr. Crabtree opened the program with a paper on "Fractures of the Skull." He reported on 267 fractures which he had seen personally, giving a very interesting and instructive discussion, speaking also of the treatment. This paper was discussed by Doctors Maghy and Burger. Dr. Pickard gave a paper on "The Clinical Value of Basal Metabolism." The paper was illustrated by lantern slides and charts which brought out the particular value of this diagnostic

method in cases of thyroid disease and disfunction. The paper was discussed by Doctors Kocher, Kinney and Burger. The next paper was by Dr. Charles W. Brown, who took for his subject "Secondary Radical Mastoid Operation." The final content was by Dr. District the paper of the p paper was by Dr. Durr, who spoke on "Renal Diabetes." Dr. Durr mentioned the various types of glycosuria and gave a valuable discussion on the diagnosis and methods of treatment used. Dr. Kocher, who discussed the paper, emphasized the necessity for differential diagnosis between the renal and other types of glycosuria and particularly the differences in treatment.

San Francisco County (as reported by Dr. LeRoy Briggs, secretary)—During the month of October, 1921, the following meetings were held:

Tuesday, October 11—General Meeting

1. Report of matters of general interest to the profession. J. H. Graves for W. E. Musgrave.

2. Precancerous lesions. A. R. Kilgore

Treatment of pelvic malignancy. F. W. Lynch. Results of cancer surgery. Emmet Rixford.

5. X-ray and radium treatment of cancer. Laurence Taussig.

Tuesday, October 18—Committee on Industrial Medicine

1. Fractures about the shoulder region in industrial cases. W. B. Coffey.
2. Injuries, other than fractures, about the shoulder region. A. L. Fisher.
Tuesday, October 25—Section on Eye, Ear,

Nose and Throat

1. Practical application of neuro-otology with

report of cases. F. C. Lewitt.

2. Further statistics on radium in the treatment of cataract. W. S. Franklin and F. C. Cordes.

They reported, in part, as follows:

To date 106 cases have been treated. Of these 84 per cent showed improvement. We have recorded these according to the patient's vision at the initial visit.

.1 vision or less—68% showed improvement, the highest vision obtained being .3.

.2 vision-66% showed improvement; 33% had .5 vision.

.3 vision-58% improved. Of these 25% obtained

a vision of .5 or better.
.4 vision—84% improved; 3 cases became rapidly

.5 vision-92% improved; the final vision in 6 cases being .8 or better.

.6 vision-100% improved; 20% obtained normal vision.

.8 vision—100% improved; 30% of these had a vision of 1.0, the remainder 1.0?

1.0? or better—6 such cases treated; 4 improved to 1.5, one remained at 1.0? and one became slightly worse.

Conclusions (1) Radium is not applicable in cataract cases where the vision has been reduced below .4, excepting in unoperable cases.

Irrespective of the radium, a few cases have

apparently become rapidly worse.

- (3) Some cases were not influenced by radium.(4) Three cases came to operation and the radium treatment did not cause operative complications.
- (5) Cases must be refracted to obtain maximum vision, as refraction changes during radium treat-

ment.
3. X-ray diagnosis of sinus disease.

Chamberlain.

Dr. Chamberlain said: "In order to obtain maximum effectiveness with this method, it is essential (1) to base all examinations upon stereoscopic projections; (2) to have patients radiographed in sitting position, not lying down; (3) to interpret films, carefully and expertly, in terms of anatomy, physiology and pathology.
"The advantages of the stereoscope include free-

dom from confusion through artefacts or super-imposed densities, ready localization of densities, less dependence upon exactness of the technician's angles, and three-dimensional study of the visualized structures.

"The reason for using the sitting position is the occasional demonstration of a fluid level, where

the prone position would give a spread-out density. "In the last analysis, the rhinologist himself should be best able to interpret sinus radiographs. Until he has become familiar with the method, he may rely upon the medical roentgenologist, demanding of the latter evidence of a working knowledge of the anatomy, physiology and pathology of

Santa Barbara County (as reported by Dr. H. L. Schurmeier, secretary)—The society met at the Cottage Hospital, October 24, with fourteen members present and forty-two absent.

The paper of the evening was presented by Dr. A. B. Cooke of Los Angeles, who spoke at length on the "Goiter Problem." He classified goiter as simple and toxic, the latter including the exophthalsimple and toxic, the latter including the exopiniar-mic and toxic adenoma. He gave a summary of symptoms and treatment applied in each type. A general discussion followed. Dr. Ullman gave an interesting and detailed report of the Washington meeting of the American Roentgen Ray Associa-tion, followed by a general discussion.

Santa Clara County (as reported by Dr. J. L. Pritchard, secretary)—The society met at the U. S. P. H. S. Hospital, Palo Alto, October 19, with fifty members present and fifty-five absent.

Dr. Gregory, secretary of the San Mateo County Society, was the guest of the evening. The program consisted of a paper on "Rehabilitation of the Ex-Service Man," by Dr. J. M. Wheate, and "So-Called Shell Shock," by Dr. Paul Bowers.

On November 30 a dinner dance was held at the Hotel Vendome, San Jose, which was the social event in medical circles of the year, the membership being present almost to a man.

membership being present almost to a man.

San Joaquin County (as reported by Dr. Dewey R. Powell, secretary)—The regular meeting of the San Joaquin County Society was held October 14 in the Women's Building of the Stockton State Hospital, Dr. L. R. Johnson presiding. There were thirty-one members present and forty-four absent, with Superior Judges Plummer, Buck and Young as guests. The program was presented by the doctors of the hospital staff as follows: Dr. Clark, doctors of the hospital staff as follows: Dr. Clark, Dr. Conzelman, Dementia Precox; Dr. McCoskey, Manic Depressive Psychoses; Dr. Sanderson, General Paralysis; Dr. Marnell, Senile and Arteriosclerotic Psychoses; Dr. McLeish, Criminal Insane—case of General Paralysis, Dementia Precox and Borderline Conditions; Dr. Smythe, Treatment of Physical Conditions in Mental Patients; Dr. Williamson, Laboratory, Work Dr. Williamson, Laboratory Work.

A special meeting on Hospital Betterment was held on October 21, when Dr. W. E. Musgrave, secretary of the State Society, and Mr. Celestine J. Sullivan, executive secretary of the League for the Conservation of Public Health, were the principal speakers.

Stanislaus County (as reported by Dr. E. F. Reamer, secretary)—The October meeting was held at the Modesto Hotel. The meeting was opened by a get-together banquet. There were twenty-three members and two guests present and fifteen members absent.

Dr. Alfred C. Reed of San Francisco discussed the Diagnosis and Treatment of Amebic Colitis. Dr. John Rehfisch of San Francisco discussed the cancer problem, with special reference to the progam for cancer week. Drs. Thomas F. Bowles, Lloyd D. Mottram, Walter A. Smith, John A. Cooper and E. F. Hagedorn were elected members.